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**FACSIMILE TRANSMITTAL**

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**TO:**

Name: Mail Stop AF  
Group Art Unit 3738 / Examiner Bruce Edward Snow

Firm: U.S. Patent & Trademark Office

Fax No.: 571-273-8300

Subject: U.S. Patent Application No. 09/553,573

Gary K. Michelson

Filed: April 19, 2000

ARTIFICIAL LUMBAR NON-ARCUATE  
INTERBODY SPINAL IMPLANT HAVING  
AN ASYMMETRICAL LEADING END  
(as amended)

Attorney Docket No. 101.0077-00000

Customer No. 22882

Confirmation No.: 3776

**FROM:**

Name: Amedeo F. Ferraro, Esq.

Phone No.: 310-286-9800

No. of Pages (including this): 13

Date: September 12, 2008

Confirmation Copy to Follow: NO

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**Message:**

**CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**

I hereby certify that the attached Transmittal Form (in duplicate) and Amendment After Final are being facsimile transmitted to the U.S. Patent and Trademark Office on September 12, 2008.

  
Miyabi Grace Forker

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FORM PTO-1083

Attorney Docket No.: 101.0077-00000  
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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Gary K. Michelson

Serial No: 09/553,573

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Confirmation No.: 3776

Art Unit: 3738

Examiner: Bruce Edward Snow

Mail Stop AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment After Final in reply to the Final Office Action dated June 13, 2008 in the above-identified application.

- ☒ No additional fee is required.  
☐ Applicant hereby requests a \*\*\*-month extension of time to respond to the above office action.  
☐ A Terminal Disclaimer is enclosed.  
☐ An Information Disclosure Statement Under 37 C.F.R. § 1.97( ) with Form PTO/SB/08 is enclosed.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	42	-	114	0	LG=\$50 SM=\$25	\$ 0
INDEPENDENT CLAIMS FEE	1	-	3	0	LG=\$200 SM=\$100	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180	\$ 0
TOTAL						\$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ The total amount of \$\*\*\*.00 to cover the \*\*\*-month extension fee is to be charged to Deposit Account No. 50-3726.  
☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-3726. A copy of this sheet is enclosed.  
☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims  
☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,

MARTIN &amp; FERRARO, LLP

By: 

Amleto F. Ferraro

Registration No. 37,129

Date: September 12, 2008

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Transmittal of Amendment 9-12-08

FORM PTO-1083

Attorney Docket No.: 101.0077-00000  
Customer No. 22882

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Respectfully submitted,

MARTIN &amp; FERRARO, LLP

By: 

Arnedo F. Ferraro

Registration No. 37,129

Date: September 12, 2008

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) Examiner: Bruce Edward Snow  
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Commissioner for Patents  
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Alexandria, VA 22313-1450

Sir:

**AMENDMENT AFTER FINAL**

In reply to the Advisory Action of September 5, 2008 and to the Final Office Action of June 13, 2008, and pursuant to 37 C.F.R. § 1.116, the Applicant proposes that this application be amended as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 9 of this paper.

Amendment AF 9-12-08